

FILED 10 SEP 30 15:04 USDC-ORP

**UNITED STATES DISTRICT COURT**

for the  
District of Oregon  
Portland Division

**Civil Action No. 10-CV-544-ST**

**PROOF OF SERVICE**

**In Admiralty**

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**Reference:** "Notice of Final Determination and Judgment in Nihil Dicit"  
sent via USPO First Class Mail/Certified Mail to all Third Party Defendants,  
Libellees on or about August 30, 2010.

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**NOTICE: THIS DOCUMENT IS NOT INTENDED TO THREATEN, HARASS, HINDER OR  
OBSTRUCT ANY LAWFUL OPERATIONS. IT IS FOR THE PURPOSES OF OBTAINING  
LAWFUL REMEDY AS IS PROVIDED BY LAW.**

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**PROOF OF SERVICE**

for "Notice of Final Determination and Judgment in Nihil Dicit"  
for Default to Counterclaim In Admiralty  
filed in UNITED STATES DISTRICT COURT DISTRICT OF OREGON PORTLAND DIVISION  
CASE 10-CV-544-ST Duplicate Original Page 1 of 3

**Janet Davis Majhor**  
    **, Third Party Plaintiff,**  
    **, American, Libellant,**  
    **, Secured Party Creditor**

**v.**

Notice to Agent is Notice to Principal Notice to Principal is Notice to Agent
--

MARY L. MORAN, CLERK OF COURT  
1000 SW THIRD AVENUE #740  
PORTLAND, OREGON 97204

USPO First Class and Certified Mail #  
7008 1140 0002 8788 6538

UNITED STATES ATTORNEY'S OFFICE  
1000 SW THIRD AVENUE #600  
PORTLAND, OREGON 97204

USPO First Class and Certified Mail #  
7008 1140 0002 8788 6545

SCOTT ERIK ASPHAUG, OSB #83367  
ASSISTANT UNITED STATES ATTORNEY  
UNITED STATES ATTORNEY'S OFFICE  
1000 SW THIRD AVENUE #600  
PORTLAND, OREGON 97204

USPO First Class and Certified Mail #  
7008 1140 0002 8788 6545

DWIGHT C. HOLTON, OSB #09054  
UNITED STATES ATTORNEY  
UNITED STATES ATTORNEY'S OFFICE  
1000 SW THIRD AVENUE #600  
PORTLAND, OREGON 97204

USPO First Class and Certified Mail #  
7008 1140 0002 8788 6545

KENT S. ROBINSON, OSB #09625  
ACTING UNITED STATES ATTORNEY  
UNITED STATES ATTORNEY'S OFFICE  
1000 SW THIRD AVENUE #600  
PORTLAND, OREGON 97204

USPO First Class and Certified Mail #  
7008 1140 0002 8788 6545

SEAN J. HAMBLET  
FEDERAL BUREAU OF INVESTIGATION  
1500 SW FIRST AVENUE #400  
PORTLAND, OREGON 97201

USPO First Class and Certified Mail #  
7008 1140 0002 8788 6552

MATTHEW T. JOHNSON  
BANK EXAMINER, OCC  
250 E STREET SW  
WASHINGTON, DC 20219

USPO First Class and Certified Mail #  
7008 1140 0002 8788 6569

JUDGE MICHAEL MOSSMAN  
ISLN 902335156  
1000 SW THIRD AVENUE  
PORTLAND, OREGON 97204

USPO First Class and Certified Mail #  
7008 1140 0002 8788 6576

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**PROOF OF SERVICE**

for "Notice of Final Determination and Judgment in Nihil Dicit"  
for Default to Counterclaim In Admiralty  
filed in UNITED STATES DISTRICT COURT DISTRICT OF OREGON PORTLAND DIVISION  
CASE 10-CV-544-ST Duplicate Original Page 2 of 3

JUDGE JANICE M. STEWART  
ISLN 903410340  
1000 SW THIRD AVENUE  
PORTLAND, OREGON 97204

USPO First Class and Certified Mail #  
7008 1140 0002 8788 6583

, Third Party Defendants, Libellees  
, Severally and Individually, All

---

## PROOF OF SERVICE

### LIST OF DOCUMENTS FILED/MAILED:

1. PROOF OF SERVICE [three (3) pages];
2. True Copies – USPS Track & Confirm, PS Form 3811 (known as Return Receipt “Green Cards”), PS Form 3800 Certified Mail Receipts and Sales Receipts for:  
7009 3410 0000 9699 6083; 7009 3410 0000 9699 6090; 7009 3410 0000 9699 6106;  
7009 3410 0000 9699 6113; 7009 3410 0000 9699 6120; 7009 3410 0000 9699 6137,  
[two (12) pages].

**NOTICE TO THE COURT AND ITS OFFICERS:** All Third Party Defendants/Libellees are subject to postal statutes and the jurisdiction of the Universal Postal Union. All Third Party Defendants/Libellees carry the full implications and obligations in relation to the Law of Nations, International Agreements and Assurances and under the United Nations Convention on International Bills of Exchange and International Promissory Notes (UNCITRAL).

**NOTICE TO THE COURT AND ITS OFFICERS:** All responses are required to be served upon the Libellant and the Notary Acceptor at the location shown and expressly and exactly as shown below. All communications must be written and sent to the Notary (who is not a party to this claim). Any communications sent to any other address other than the one provided below will be considered a non-response.

Saleem Majid, Notary  
For benefit of *Janet Davis Majhor*,  
*American, Secured Party Creditor, Libellant,*  
*Third Party Plaintiff in Interest*  
16055 Southwest Walker Road Suite 505  
Beaverton, Oregon 97006

Respectfully Submitted  
on **September 30, 2010.**

Signature: \_\_\_\_\_

  
-3c USA

**Janet Davis Majhor**, American, Secured Party  
Creditor, Libellant, Third Party Plaintiff in Interest,  
One of the **people** of the united States of America

---

### PROOF OF SERVICE

for “Notice of Final Determination and Judgment in Nihil Dicit”  
for Default to Counterclaim In Admiralty  
filed in UNITED STATES DISTRICT COURT DISTRICT OF OREGON PORTLAND DIVISION  
CASE 10-CV-544-ST Duplicate Original Page 3 of 3



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## Track & Confirm

### Search Results

Label/Receipt Number: 7009 3410 0000 9699 6083

Service(s): **Certified Mail™**

Status: **Delivered**

Your item was delivered at 10:07 am on August 31, 2010 in PORTLAND, OR 97207.

### Track & Confirm

Enter Label/Receipt Number.



### Notification Options

Track & Confirm by email

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## Track & Confirm

### Search Results

Label/Receipt Number: 7009 3410 0000 9699 6090

Service(s): **Certified Mail™**Status: **Delivered**

Your item was delivered at 1:06 pm on August 31, 2010 in PORTLAND,  
OR 97204.

### Track & Confirm

Enter Label/Receipt Number.



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## Track & Confirm

### Search Results

Label/Receipt Number: **7009 3410 0000 9699 6106**Service(s): **Certified Mail™**Status: **Delivered**

Your item was delivered at 8:15 am on September 01, 2010 in  
PORTLAND, OR 97207.

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Enter Label/Receipt Number.



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Label/Receipt Number: 7009 3410 0000 9699 6113

Service(s): Certified Mail™

Status: Delivered

Your item was delivered at 6:49 am on September 03, 2010 in WASHINGTON, DC 20219.

### Track & Confirm

Enter Label/Receipt Number.



#### Detailed Results:

- Delivered, September 03, 2010, 6:49 am, WASHINGTON, DC 20219
- Arrival at Unit, September 03, 2010, 6:08 am, WASHINGTON, DC 20022

### Notification Options

#### Track & Confirm by email

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United States Postal Service  
Interagency Mail



Integrated Customer  
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## Track & Confirm

### Search Results

Label/Receipt Number: **7009 3410 0000 9699 6120**

Service(s): **Certified Mail™**

Status: **Delivered**

Your item was delivered at 10:07 am on August 31, 2010 in PORTLAND, OR 97207.

### Track & Confirm

Enter Label/Receipt Number.



### Notification Options

#### Track & Confirm by email

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## Track & Confirm

### Search Results

Label/Receipt Number: 7009 3410 0000 9699 6137

Service(s): Certified Mail™

Status: Delivered

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### Track & Confirm

Enter Label/Receipt Number.



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Equal Housing Opportunity



Equal Housing Opportunity

The UPS Store - #3133  
16055 SW Walker Rd  
Beaverton, OR 97006  
(503) 617-4592

08/30/10 01:16 PM

We are the one stop for all your  
shipping, postal and business needs.

We offer all the services you need  
to keep your business going.



001 000007 (022)	TO \$	0.00
First Class Letter		
Reg Unit Price	\$	1.32
Other (\$1.32)	\$	1.32-
003 500706 (022)	TO \$	8.70
Certified / Return		
SubTotal	\$	8.70
Total	\$	8.70
Cash	\$	20.00
Change	\$	11.30-

Receipt ID 82939982029383888853 002 Items  
CSH: Anna Tran: 3101 Reg: 002

Thank you for visiting our store.  
Please come back again soon.

Whatever your business and personal  
needs, we are here to serve you.

US Postal Rates Are Subject to Surcharge

ENTER FOR A CHANCE TO  
WIN \$1000

We value your feedback  
To enter please complete the customer  
satisfaction survey located at:

[www.theupsstore.com/survey](http://www.theupsstore.com/survey)

*Moran*

8909 6696 0000 0746 6002

# U.S. Postal Service CERTIFIED MAIL - RECEIPT

(Domestic Mail Only - Not for International Coverage)

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL MAIL

Postage	\$ 4.40 AUG 30 10	9834037
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage /		

Postmark  
Here

Sent To **MARY L MORAN CLERK OF COURT**  
1000 SW THIRD AVE #740  
PORTLAND, OR 97204  
City, State, ZIP+4

PS Form 3811, February 2004

2. Article Number  
(Transfer from service label)  
PS Form 3811, February 2004

7009 3410 0000 9699 6083

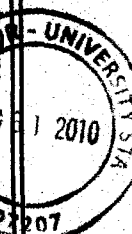
Domestic Return Receipt

102595-02-M-1540

1. Article Addressed to:
1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  
2. Print your name and address on the reverse so that we can return the card to you.  
3. Attach this card to the back of the mailpiece, or on the front if space permits.

MARY L MORAN CLERK OF COURT  
1000 SW THIRD AVE #740  
PORTLAND, OR 97204

3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input type="checkbox"/> No
5. Signature A. Signature of Addressee B. Signature of Agent C. Signature of Delivery Person D. Signature of Post Office	
6. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:	



SENDER COMPLETE THIS SECTION

ADDRESSEE COMPLETE THIS SECTION ON DELIVERY

7141L DIC17 10-CV-544-ST

The UPS Store - #3133  
16055 SW Walker Rd  
Beaverton, OR 97006  
(503) 617-4592

08/30/10 01:18 PM

We are the one stop for all your  
shipping, postal and business needs.

We offer all the services you need  
to keep your business going.



001 000007 (022)	TO \$	0.00
First Class Letter		
Reg Unit Price	\$	1.32
Other (\$1.32)	\$	1.32-
003 500706 (022)	TO \$	8.70
Certified / Return		
	SubTotal	\$ 8.70
	Total	\$ 8.70
	Cash	\$ 10.75
	Change	\$ 2.05-

Receipt ID 82939982029382888852 002 Items  
CSH: Anna Tran: 3102 Reg: 002

Thank you for visiting our store.  
Please come back again soon.

Whatever your business and personal  
needs, we are here to serve you.

US Postal Rates Are Subject to Surcharge

ENTER FOR A CHANCE TO  
WIN \$1000

We value your feedback  
To enter please complete the customer  
satisfaction survey located at:

[www.theupsstore.com/survey](http://www.theupsstore.com/survey)

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only) (Insurance Coverage: \$5000)  
For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL MAIL**

Postage \$ **3.32** AUG 30 10 3836037  
Certified Fee  
Return Receipt Fee (Endorsement Required)  
Restricted Delivery Fee (Endorsement Required)  
Total Postage \$  
Postmark Here

**UNITED STATES ATTORNEY'S OFFICE**  
Sent To **SCOTT ERIK ASPHAUG, OSB #83367**  
**DWIGHT C. HOLTON, OSB # 09054**  
Street, Apt. No., or PO Box No. **KENT S. ROBINSON, OSB #09625**  
City, State, Zip **1000 SW THIRD AVE #600**  
**PORTLAND, OR 97204**

PS Form 3811, February 2004

7/11/10 DIGIT 10-CV-544-ST

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:  
**UNITED STATES ATTORNEY'S OFFICE**  
**SCOTT ERIK ASPHAUG, OSB #83367**  
**DWIGHT C. HOLTON, OSB # 09054**  
**KENT S. ROBINSON, OSB #09625**  
**1000 SW THIRD AVE #600**  
**PORTLAND, OR 97204**

2. Article Number (Transfer from service label)  
**4009341000096996090**

3. Service Type  
☒ Certified Mail  
☐ Registered  
☐ Insured Mail  
☐ Express Mail  
☐ Return Receipt for Merchandise  
☐ C.O.D.  
☐ Restricted Delivery? (Extra Fee) ☐ Yes

4. Restricted Delivery? (Extra Fee) ☐ Yes

5. Signature  
**Lauren Garcia**  
B. Received by (Printed Name)  
C. Date of Delivery **8/31/10**  
D. Is delivery address different from item 1? ☐ Yes ☐ No  
If YES, enter delivery address below:

PS Form 3811, February 2004 Domestic Return Receipt

*HAMBLET  
FBI*

The UPS Store - #3133  
16055 SW Walker Rd  
Beaverton, OR 97006  
(503) 617-4592

08/30/10 01:18 PM

We are the one stop for all your  
shipping, postal and business needs.

We offer all the services you need  
to keep your business going.



001 000007 (022)	TO \$	0.00
First Class Letter		
Reg Unit Price	\$	1.32
Other (\$1.32)\$	1.32-	
003 500706 (022)	TO \$	8.70
Certified / Return		
SubTotal	\$	8.70
Total	\$	8.70
Cash	\$	8.75
Change	\$	0.05-

Receipt ID 82939982029389888851 002 Items  
CSH: Anna Tran: 3103 Reg: 002

Thank you for visiting our store.  
Please come back again soon.

Whatever your business and personal  
needs, we are here to serve you.

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ENTER FOR A CHANCE TO  
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We value your feedback  
To enter please complete the customer  
satisfaction survey located at:

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U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only: No Insurance Coverage Provided)

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL U.S. MAIL**

Postage \$ *8.70* Meter *3836037*

Certified Fee *0.00*

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage *\$8.70*

Sent To **SEAN J. HAMBLET**  
**FEDERAL BUREAU OF INVESTIGATION**  
Street, Apt. No. *1500 SW FIRST AVE #400*  
or PO Box No. *PORTLAND, OR 97201*  
City, State, Zip

PS Form 3811, February 2004

*7009 3410 0000 9699 6106*

PS Form 3811, February 2004

Domestic Return Receipt

102585-02-11-1000

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:

SEAN J. HAMBLET  
FEDERAL BUREAU OF INVESTIGATION  
1500 SW FIRST AVE #400  
PORTLAND, OR 97201

2. Article Number  
(Transfer from service label)

7009 3410 0000 9699 6106

3. Service Type

☒ Certified Mail ☐ Express Mail

☐ Registered ☐ Return Receipt for Merchandise

☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *Seamless*

B. Received by (Printed Name) *Seamless*

C. Date of Delivery *9-1-10*

D. Is delivery address different from item 1? ☐ Yes ☒ No

If "Yes", enter delivery address below:

**PORTLAND OR SEP 1 97201**

The UPS Store - #3133  
16055 SW Walker Rd  
Beaverton, OR 97006  
(503) 617-4592

Johnson  
OCC  
TREASURY

08/30/10 01:19 PM

We are the one stop for all your  
shipping, postal and business needs.

We offer all the services you need  
to keep your business going.



001 000007 (022)	TO \$	0.00
First Class Letter		
Reg Unit Price	\$	1.32
Other (\$1.32)	\$	1.32-
003 500706 (022)	TO \$	8.70
Certified / Return		
SubTotal	\$	8.70
Total	\$	8.70
Cash	\$	21.00
Change	\$	12.30-

Receipt ID 82939982029380888850 002 Items  
CSH: Anna Tran: 3104 Reg: 002

Thank you for visiting our store.  
Please come back again soon.

Whatever your business and personal  
needs, we are here to serve you.

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ENTER FOR A CHANCE TO  
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We value your feedback  
To enter please complete the customer  
satisfaction survey located at:

[www.theupsstore.com/survey](http://www.theupsstore.com/survey)

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL U.S. POSTAGE**

Postage \$ 8.70  
Certified Fee \$ 0.00  
Return Receipt Fee (Endorsement Required) \$  
Restricted Delivery Fee (Endorsement Required) \$  
Total Postage \$ 8.70

Postmark Here

Sent To **MATTHEW T. JOHNSON**  
**BANK EXAMINER, OCC**  
Street, Apt. No. **250 E STREET SW**  
or PO Box No. **WASHINGTON, DC 20219**  
City, State, Zip

PS Form 3820

PS Form 3811, February 2004 Domestic Return Receipt

2. Article Number (Transfer from service label) **7009 3410 0000 9699 6113**

1. Article Addressed to:

**MATTHEW T. JOHNSON**  
**BANK EXAMINER, OCC**  
**250 E STREET SW**  
**WASHINGTON, DC 20219**

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  
2. Print your name and address on the reverse so that we can return the card to you.  
3. Attach this card to the back of the mailpiece, or on the front if space permits.

3. Service Type  
☒ Certified Mail  
☐ Registered  
☐ Insured Mail  
☐ Express Mail  
☐ Return Receipt for Merchandise  
☐ C.O.D.  
☐ Restricted Delivery (Signature Required)  
☐ Yes

4. Signature  
**X** *Matthew T. Johnson*  
B. Received by (Printed Name) **M. T. JOHNSON**  
C. Date of Delivery **9/13/10**  
D. Is delivery address different from item 1? ☐ Yes ☐ No  
If YES, enter delivery address below:

71411 D1C17 10-CX-544-ST

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

[illegible]

A. Signature X <i>[Signature]</i>	B. Agent <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee
C. Date of Delivery E. Registered by (Printed Name) <i>Andy Moore</i> <i>Andy Moore</i>	C. Date of Delivery E/31/10
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, give delivery address: <input type="checkbox"/> No DDP:	
OR - UNIVERSITY AUG 31 2010 072	
3. Service type	